

## FORMAL COMPLAINT

Illinois Commerce Commission 527 E. Capitol Avenue Springfield, Illinois 62701

Fo	Commission Use Only:	
r	05-0729	
Case:	0001	_



Regarding a complaint by (Person making the complaint):LORETTA_KIDD	
Against (Utility name): SBC - Allinois Bell Telepha	ne Campany
As to (Reason for complaint) - SBC accuses ne of using a false	Social Security number
and name.	
in Chicago Illinois.	CHI III
TO THE ILLINOIS COMMERCE COMMISSION, SPRINGFIELD, ILLINOIS:	Unit #5 Chicago, Filinois 30612
My mailing address is 2729 W, Congress ParkWay	Unit #5 Chicago, Flinois 50612
The service address that I am complaining about is 2729 W. Congress ParkWa	y Unit 5 Chicago IIIInoi 60612
My home telephone is [773] 826 - 044	9 9
Between 8:30 A.M. and 5:00 P.M. weekdays, I can be reached at $[773]$ $699-84$	00
(Full name of utility company) SBC to the provisions of the Illinois Public Utilities Act.	(respondent) is a public utility and is subject
In the space below, list the specific section of the law, Commission rule(s), or utility tariffs that you ${ m I/A}$	ı think is involved with your complaint.
Have you contacted the Consumer Services Division of the Illinois Commerce Commission about you	ur complaint? X Yes No
Has your complaint filed with that office been closed?	Yes X Na

Please state your complaint briefly. Number each of the paragraphs. Please include time period and dollar amounts involved with your complaint. Use an extra sheet of paper if needed.

## SEE ATTACHMLENT

Please clearly state what you want the Commission to do in this case: I would like the ICC TO INTERVENE AND PREVENT SBC FROM DISCONNECTING MY PRESENT PHONE. Complainant's Signature If an attorney will represent you, please give the attorney's name, address, and telephone number. You need to file the original with the Commission. Also, provide one copy for each utility complained about (referred to as respondents). VERIFICATION A notary public must witness the completion of this part of the form. first being duly sworn, say that I have read the above petition and know what it says. The contents of this petition are true to the best of my knowledge. Subspribed and sworn/affirmed to before me on (month, day, year) Votary Public, Illinois

NOTE: Failure to answer all of the questions on this form may result in this form being returned without processing. If you have questions, please call

the counselor in the Consumer Services Division that handled your informal complaint.